



PLACER COUNTY  
IHSS Advisory Committee  
11533 "C" Avenue, Auburn, CA 95603  
(530) 886-3680

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**Joint Special Meeting  
February 15, 2006**

**Meeting Minutes**

**Attendance:** (alphabetical order by county)

Calaveras County Advisory Members / Staff

Louis, Bob (Advisory Chair)	Reeves, Colleen (PA Director)
McGraw, Robert (Advisory Member)	Sable, Teresa (PA Office Technician)

El Dorado County Advisory Members / Staff

Leahy, Alicia (PA Registry/Training Specialist)	Polito, Mame (PA Program Manager)
Lowe, Claudia (Advisory Member)	Porter, Rose (RN Intern)
Peaker, Kara (PA Registry/Training Specialist)	Thomas, Jane (Advisory Chair)
Podsedly, Jack (Advisory Vice Chair)	

Placer County Advisory Members / Staff

DeGraaf, Mary (Advisory Member)	Luce, Eldon (PA Program Manager)
Faia, Debbie (PA Registry Specialist)	Maldaner, Margaret (Advisory Chair)
Fletcher, Mike (Advisory Vice Chair)	Marshall, Eula (Advisory Member)
Herrington, Shirlee (PA Secretary)	McCollum, Tatsia (IHSS Social Worker)
Lindsley, Ruth (Advisory Member)	Snoberger, Katie (Advisory Member)

**1. Call to Order:** Meeting called to order at 10:00 a.m. by meeting facilitator Mame Polito. Introductions were made and the group agreed on the following meeting etiquette:

- Start on time
- Finish on time
- No shouting
- Come prepared
- Come with an open mind
- Express your opinions in a non-threatening manner
- No side conversations – no interruptions
- Show consideration and respect
- There are no dumb questions
- Stay on topic
- Share the "air-time"

**Open Forum:** There were no public comments made during open forum.

**Agenda Review:** The meeting agenda was reviewed. Robert McGraw motioned and Jack Podsedly seconded to approve the agenda as presented. The motion carried.

2. **AB 1234 Implementation:** Mame summarized the Local Government Ethics Bill (AB 1234) and outlined the requirements for all IHSS Advisory Committees. There was a discussion as to whether or not all counties must adhere to its requirements, which designated employees must attend the ethics trainings and whether or not the ethics training will be CEU's accredited. These questions were deferred for members or staff to investigate and ask their respective legal counsel. For more details on AB 1234 go to the Fair Political Practice Commission (FPPC) on their website at <http://www.fppc.ca.gov/index.html?id=466>.
3. **Advisory Endeavors / Group Exercise:** The group broke into two separate groups and participants were asked to discuss their Advisory Committees' sponsored activities and achievements to date. The following activities and achievements were discussed:
- A. Initiated wage increase for care providers (Placer)
  - B. Outreached for more Advisory Committee members by: advertising, networking, PA newsletters and word of mouth (Calaveras, El Dorado and Placer)
  - C. Initiated the negotiations with the union for increase in care provider wages and benefits (Placer)
  - D. Paid for the printing of quarterly Care Connection newsletters (El Dorado)
  - E. Wrote articles or suggested contents for newsletters (Calaveras, El Dorado and Placer)
  - F. Sponsored, with other county agencies, a "Fall Health Fair" for seniors and adults with disabilities that was widely attended (El Dorado)
  - G. Attended trainings, classes and conferences to increase knowledge of, and issues surrounding, in home care services (Calaveras, El Dorado and Placer)
  - H. Assisted the Public Authority with the development of *Registry* and *Registry* policies (Placer)
  - I. Held a "Provider Appreciation" day (Calaveras)
  - J. Conducted provider survey for training / class ideas and locations (Calaveras, El Dorado, and Placer)
  - K. Hired consultant to help develop Advisory Committee goals and objectives (Calaveras)
  - L. Periodically reviewed the progress of Advisory goals and objectives (Calaveras)
  - M. Paid for DOJ background checks for care providers applying to the *Registry* (El Dorado)
  - N. Conducted public relations activities (attending state hearings, doing radio shows, etc.) to increase knowledge, awareness and importance of the IHSS program (Placer)
  - O. Assisted with the assessment of disabled housing in the county (Placer)
  - P. Provided Advisory Committee participation via conference call (El Dorado)
  - Q. Bought video equipment for the purpose of public, provider and recipient education (El Dorado)
  - R. Conducted an annual presentation to the Board of Supervisors (Calaveras)
  - S. Presented to organizations such as AARP, Comm. on Aging, etc. (Calaveras)

- T. Aided in the planning of annual Advisory Committee State Conference and developing CICA organization (Placer)
- U. Held “Informational Exchange” with members of the press, representatives from legislative offices, IHSS recipients and care providers during Governor’s proposed cuts to IHSS program (El Dorado)
- V. Conducted a recipient satisfaction survey via telephone (El Dorado)
- W. Mailed educational materials about Medicare to all recipients (Placer)
- X. Held meetings in outlying areas of county (El Dorado)

**4. Advisory Committee Challenges and Solutions / Group Exercise:** The group was asked to identify some IHSS Advisory Committee challenges and possible solutions. The following challenges and solutions were discussed:

- A. Challenge: Recipients/consumers ask care providers to do unauthorized services and get upset when care providers explain that they cannot do it.
  - Solution 1: IHSS Social Worker can ensure the recipient/consumer is educated and understands the Notice of Action and what IHSS tasks and services the program will and can pay
  - Solution 2: Recipients/consumers can improve communication between and care providers with a written work agreement to identifying itemized tasks
  - Solution 3: Care providers can remind recipient/consumer that they are only covered by worker’s compensation if they are injured doing an *authorized service*
  - Solution 4: PA staff could conduct home visits with recipient/consumer and the care provider within a couple of weeks of *Registry* match
  - Solution 5: PA could conduct follow-up phone calls with care providers to see how things are going
- B. Challenge: Recipients/consumers do not understand that *they* are the employer of the care provider (e.g: PA provides registry referral assistance to the recipient/consumer; the PA is not an employment service and does not “send” care providers to them. Recipients/consumers have to interview care providers, explain to care providers how they like things done in the home, create work agreement with new care providers, coordinate all care provider hours if they have more than one care provider, etc.)
  - Solution 1: IHSS Social Worker could educate the recipient/consumer to ensure they understand how the IHSS program works and that *they* are the employer
  - Solution 2: PA staff can offer interviewing assistance to recipient/consumer and assist with creating a work agreement with the recipient/consumer and care provider
- C. Challenge: Difficult recipient/consumer – changes in the recipient’s/consumer’s behavior for situations that would not warrant APS reporting.
  - Solution1: Provider should contact recipient’s/consumer’s family or guardian to voice their concerns of what they have observed.

- **Solution 2:** Provider might contact the PA and/or IHSS to inform them of their employment difficulties with the recipient/consumer if the family or guardian does not respond. It is critical that recipient/consumer confidentiality is maintained and disclosure is given only to those that are authorized.

**5. Future Advisory Goals / Group Exercise:** Each person in the group was asked to write down one “wish”, or goal that they hoped their Advisory Committee would accomplish within the next year or so. The following wishes or goals were identified:

- A. To have consumer training and education programs and more community outreach on the IHSS program (Claudia)
- B. To have emergency services for recipients who need a care provider (Robert)
- C. To have better communication between IHSS social workers, Public Authority staff, recipients and care providers (Jack)
- D. To have concrete guidelines for IHSS services and more community outreach on the IHSS program (Margaret)
- E. To have more cultural/ethnic diversity, and more recipients and care providers, on the Advisory Committee and to be able to influence the BOA and policy makers more (Mary)
- F. To have more cultural/ethnic diversity on the Advisory Committee (Tatsia)
- G. To have more Advisory Committee members (Eula)
- H. To be able to stay on the Advisory Committee to continue learning and also more community outreach about the IHSS program (Ruth)
- I. Respite / emergency services available and also better budget outlines to show how the money is being spent to achieve the Advisory Committee’s goals and objectives (Mike)
- J. Better pay and benefits for care providers and emergency services (Katie)
- K. To have a full Advisory Committee, better pay for care providers and more IHSS education given to medical centers/sites (Jane)
- L. More time on the Advisory Committee (Bob)
- M. A full and active Advisory Committee (Colleen)

**6. CICA Representative:** Mike Fletcher presented to the group an overview of the California In-Home Supportive Services Consumer Alliance (CICA) and the upcoming spring conference.

- Members were encouraged to go to the Conference. Registration deadline is February 28<sup>th</sup>. CICA contact information and draft Q&A handout were addressed.
- Eldon Luce wanted the group to know that although the CICA Q&A sheet is addressed to “IHSS Public Authority Advisory or Governing Board Members”, the Advisory Committees are *IHSS* Advisory Committees, not *PA* Advisory Committees.
- CICA is currently applying to be it’s own 501(c)3 organization and not a part of CAPA (California Association of Public Authorities) and will have its own web site soon.

**7. Meeting Adjourned:** Meeting was adjourned at 2:00 p.m.